PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450 Alexandria, Virginia 22313-1450

à ,			or <u>Fax</u>	(703) 746-4000	IIII 22313-1430	
INSTRUCTIONS: This form sho appropriate. All further correspon indicated unless corrected below maintenance fee notifications.	uld be used for transi dence including the Pa or directed otherwise i	mitting the ISSUI atent, advance ord n Block 1, by (a)	E FEE and PUBL lers and notification specifying a new	ICATION FEE (if requ n of maintenance fees v correspondence address	ired). Blocks I through 4 s vill be mailed to the current and/or (b) indicating a sep	should be completed where t correspondence address as arate "FEE ADDRESS" for
CURRENT CORRESPONDENCE ADDR	with any corrections or use Block 1)		Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
MADSON & METCA GATEWAY TOWER W SUITE 900 15 WEST SOUTH TEM	EST	MAY 13	204 7	I hereby certify that the States Postal Service vaddressed to the Mai	rtificate of Mailing or Tran nis Fee(s) Transmittal is beir with sufficient postage for fi I Stop ISSUE FEE address TO, on the date indicated be	ng deposited with the United rst class mail in an envelope s above, or being facsimile
SALT LAKE CITY, UT	84101		A STATE OF THE PARTY OF THE PAR	Evan R. Wit	t	(Depositor's name)
		RADEMA	AK O.		colout	(Signature)
				May 10, 200	4	(Date)
APPLICATION NO.	FILING DATE	F	IRST NAMED INVE	NTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/077,316 02/15/2002		Geoffery Wils		on	1512.2.105	9859
TITLE OF INVENTION: ADJUST	TABLE GOLF CLUB					
APPLN. TYPE	SMALL ENTITY	ISSUE FE	E	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES \$665			\$300	\$965	06/24/2004
EXAMINER		ART UNIT		CLASS-SUBCLASS]	
BLAU, STEPHEN LUTHER		3711		473-239000		
1. Change of correspondence addre CFR 1.363). □ Change of correspondence ad Address form PTO/SB/122) atta □ "Fee Address" indication (or PTO/SB/47; Rev 03-02 or more Number is required.	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.					
3. ASSIGNEE NAME AND RESI PLEASE NOTE: Unless an ass been previously submitted to the (A) NAME OF ASSIGNEE Tidymake Limited	ignee is identified belo EUSPTO or is being su	ow, no assignee da abmitted under sep (B)	ta will appear on t arate cover. Comp	he patent. Inclusion of a etion of this form is NO TY and STATE OR CO	I a substitute for filing an ass	iate when an assignment has signment.
Please check the appropriate assign	ee category or categori	ies (will not be pri	nted on the patent);	🔾 individual 🛚 🖔	corporation or other private g	roup entity 🔾 governmen
4a. The following fee(s) are enclosed: 4b. Payment of Fee(s):						
★ Issue Fee □ A check in the amount of the fee(s) is enclosed. ♣ Publication Fee ♣ Payment by credit card. Form PTO-2038 is attached.						
Advance Order - # of Copies	10		'		harge the required fee(s), or (enclose an extra	credit any overpayment, to
Director for Patents is requested to	apply the Issue Fee and					
(Authorized Signature) NOTE; The Issue Fee and Publ other than the applicant; a regis	cation Fee (if required stered attorney or ager	(Date) 05/10/ d) will not be account; or the assigne	ented from anyon	05/14/2004	MBERHE1 00000233 100	777316
other than the applicant; a regis interest as shown by the records of This collection of information is obtain or retain a benefit by the application. Confidentiality is govestimated to take 12 minutes to completed application form to the case. Any comments on the ar suggestions for reducing this but Patent and Trademark Office, 22313-1450. DO NOT SEND SEND TO: Commissioner for Pat	required by 37 CFR I public which is to fill yerned by 35 U.S.C. 12 complete, including gat ne USPTO. Time will nount of time you reden, should be sent to U.S. Department of FEES OR COMPLET ents, Alexandria, Virgi	ent and Trademark 1.311. The inform e (and by the USI 2 and 37 CFR 1.1 thering, preparing, vary depending to quire to complete to the Chief Inform f Commerce, Al TED FORMS TO inia 22313-1450.	ation is required to PTO to process) and 4. This collection is and submitting the process of the	01 FC:2501 02 FC:1504 03 FC:8001	June Gibbs	665.00 OP 300.00 OP 30.00 OP

TRANSMIT THIS FORM WITH FEE(S)

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.